Express Mail Mailing Label No. EV 689990755 US

	OIPE		Express Mail Mailing Label No. EV 689990755 US									
TRANSMITTAL FORM			Application	Serial Number	10/084,403							
			Filing Date		February 25, 2002							
			First Named Inventor		Salmonsen							
			Group Art Unit		2123							
			Examiner Name		Guill, Russell L.							
			Attorney Docket No.		PXL	-047						
			Patent No.		Not applicable							
_	·	Issue Date	te		Not applicable							
ENCLOSURES (check all that apply)												
⊠ Fe	ee Transmittal Form		Copy of Notice Parts of Applie	e to File Missing cation		Notice of Appeal to Board of Patent Appeals and Interferences						
	☐ Check Attached ☐ Copy of Fee Transmittal Form		Formal Drawin	ng(s)		Appeal Brief (in triplicate)						
	Amendment/Response ☐ Preliminary		Request For Continued Examination (RCE) Transmittal			Status Inquiry						
	Affidavits/declaration(s) Affidavits/declaration(s) Letter to Official Draftsperson including Drawings [Total Sheets]					Return Receipt Postcard						
		Power of Attor		rney f Prior Powers)		Certificate of First Class Mailing under 37 C.F.R. 1.8						
			Terminal Disclaimer			Certificate of Facsimile Transmission under 37 C.F.R. 1.8						
	Petition for Extension of Time			aration and Power Utility or Design tion		Additional Enclosure(s) (please identify below)						
	Information Disclosure Statement		Small Entity Statement									
	Form PTO-1449 Copies of IDS Citations		CD(s) for large table or computer program									
	Certified Copy of Priority	Amendment After Allowa		fter Allowance								
	Document(s) Sequence Listing submission Paper Copy/CD Computer Readable Copy Statement verifying identity of above		Request for Co Correction Certificate duplicate)	of Correction (in								
CORR	ESPONDENCE ADDRESS			SIGNATURE BLOCK								
Direct	Goodwin Exchange Boston, N	1A 02109 (617) 570- (617) 523-	-1000 -1231	Respectfully submitted, Date: June 3, 2006 Reg. No. 56,401 Tel. No.: (617) 570-1057 Fax No.: (617) 523-1231 Goodwin Procter LLP Exchange Place Boston, MA 02109								

VER 12/00

Express Mail Mailing Label No. EV 689990755 US

	Complete if Known							
PE	ion Serial Number 10/084,403							
O'FÉEGRANSMITTAL	Date		February 25, 2002					
First Nar			r	Salmonsen				
Group A				2123				
, ILIN O	er Name		Guill, Russell L.					
\2 \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	Docket No. PXL-047							
TRADEN METHOD OF PAYMENT	FEE CALCULATION (continued)							
1. Payment Enclosed:		3. ADDITIONAL FEES Large Small						
Check Money Order Other	Entity	Entity						
2. The Commissioner is hereby authorized to cre	dit	Fee	Fee	Fee Description	Fee Paid			
or charge any fee indicated below for this sub-		(\$)	(\$)					
to Deposit Account No. 07-1700.								
Required Fees (copy of this sheet enclosed).		130	65	Surcharge - late filing fee or oath				
Additional fee required under 37 CFR 1.16 an	d 1.17.	50	25	Surcharge - late provisional filing fee or cover sheet				
Overpayment Credit.		130	130	Non-English specification				
3. Applicant claims small entity status.		2,520	2,520	Request for ex parte reexamination				
FEE CALCULATION	120	60	Extension for reply within first month	120.00				
1. FILING/SEARCH/EXAM/SIZE FEES	450	225	Extension for reply within second month					
Large Entity		1020	510	Extension for reply within third month				
	ee Paid	1590	795	Extension for reply within fourth month				
		2160	1080	Extension for reply within fifth month				
300 Utility filing fee		500	250	Notice of Appeal				
500 Utility search fee		500 1000	250 500	Filing a brief in support of an appeal Request for oral hearing				
200 Utility exam fee 250 Utility Size fee (each add'l 50 pgs. over 100)		400	400	Petitions to the Commissioner (Gp. I)				
200 Design filing fee		200	200	Petitions to the Commissioner (Gp. II)				
100 Design search fee		130	130	Petitions to the Commissioner (Gp. III)				
130 Design exam fee		180	180	Submission of Information Disclosure				
Design size fee (each add'l 50 pgs. over 100)				Statement				
		790	395	Filing a submission after final				
N. J. N. J. Bara	A	700	205	rejection (37 CFR 1.129(a)) For each additional invention to be				
Number Number Rate Filed Extra	Amount	790	395	examined (37 CFR 1.129(b))				
Total Claims $-20 = x \$ 50.00 =$		100	100	Certificate of Correction for	<u> </u>			
2 0 • • • • • • • • • • • • • • • • •				applicant's error				
Independent		130	65	Submission of Terminal Disclaimer				
Claims $-3 = x $200.00 =$		Other fee (• • /	Request for Continued Examination	790.00			
☐ Multiple Dependent Claim(s), if any \$360.00 =	Other fee (S	Specify)						
Multiple Dependent Claim(s), if any \$360.00 = TOTAL:								
SMALL ENTITY DISCOUNT:								
SUBTOTAL (1) (\$)	0.00							
2. AMENDMENT CLAIM FEES	Fee Paid				(0) 01000			
Claims Highest No. Present Rate			SUBTOTAL (3)	(\$) 910.00				
Remaining Previously Extra After Amend. Paid For								
Alter Alliend. Fatd For				_				
Total - = $x $50.00 =$				SUBTOTAL (1)	0.00			
Indep = $x $200.00 =$		SUBTOTAL (2) 0.00 SUBTOTAL (3) 910.00						
First Presentation of Multiple Dep. Claim + \$360.00=			SOBIOTAL (3)	910.00				
TOTAL: (\$ SMALL ENTITY DISCOUNT: (\$								
	\$)0.00	TOTAL (\$) 910.00						
CORRESPONDENCE ADDRESS		SIGNATURE BLOCK						
Direct all correspondence to:		Respectfully submitted,						
Patent Administrator		d Ancil						
Goodwin Procter LLP		Date: June 8, 2006 Quillieu						
Exchange Place		Reg. No.: 56,401 Joel E. Lehrer						
Boston, MA 02109		Tel. No.: (617) 570-1057 Attorney for the Applicants						
Tel. No.: (617) 570-1000		Fax No.: (617) 523-1231 Goodwin Procter LLP						
Fax No.: (617) 523-1231		Exchange Place						
Customer No. 051414		l		Boston, MA 02109				